GETTING OFF FEEL FREE

v4 — STRENGTH EDITION

A Practical Recovery Guide for People Serious About Getting Free

For hardcore 7-OH dependence. No judgment. Just biology and tools.

Updated with: Peptide Recovery Protocols • Precision Taper Option • STRENGTH Stack

FIRST THINGS FIRST

You're drinking 8–12 bottles of Feel Free a day.
That's a lot. You already know that.
Here's the deal — and this is important:

WHAT'S REALLY IN THIS STUFF

Feel Free isn't just regular kratom and kava.

7-HYDROXYMITRAGYNINE (7-OH)
This is the active driver of your dependence. It's 13 to 46 TIMES stronger than regular kratom alkaloids. It hits your brain's mu-opioid receptors hard and efficiently — closer to a pharmaceutical opioid than a plant tea. This is why Feel Free hits different. And why quitting is harder than regular kratom.

OTHER ALKALOIDS + KAVA
Feel Free also contains kava (calming, GABA-adjacent) and other concentrated alkaloids. You're managing dependence on multiple compounds simultaneously. This matters for how we build your recovery stack.

WHAT THIS MEANS:

- You are not hooked on kratom. You are hooked on a concentrated, opioid-adjacent extract.
- Cold turkey is dangerous and rarely succeeds. Taper is required.

- The standard taper in previous versions was too aggressive for many people. This version fixes that.
- Peptides and targeted supplements can dramatically reduce withdrawal severity.

⚠ THE ANALOGY THAT ACTUALLY FITS

Regular kratom = beer. Feel Free = pharmaceutical-grade vodka with additional sedatives mixed in.

You wouldn’t quit a hospital-grade opioid habit the same way you’d quit beer. This guide treats your situation with the seriousness it deserves.

The good news: your biology is repairable. We have better tools now than we did even two years ago. The STRENGTH Protocol is built on that.

THE TAPER: HOW TO CUT DOWN

⚠ IMPORTANT UPDATE FROM V3

The 12-week taper in earlier versions worked for some people — but many reported the cuts were too large, too fast. If you've tried it and failed, you are not weak. The protocol was too aggressive for hardcore 7-OH dependence.

This version gives you THREE taper options:

- Option A — The Slow Taper (16 weeks) — RECOMMENDED for most people
- Option B — The Precision Pill Taper (using Centurian 7-OH capsules) — BEST for people who can't control liquid dosing
- Option C — Plain Kratom Bridge — For people who need a chemical step-down first

Pair ANY taper with the STRENGTH Peptide Stack for dramatically better results.

OPTION A — THE SLOW TAPER (16 Weeks)

Smaller cuts, longer holds. Designed for people at 8–12 bottles per day who struggle with the faster schedule.

WEEK	DAILY BOTTLES	NOTES
Start	8–12 bottles	Pick your honest starting number. No shame.
Weeks 1–2	8 bottles max	Hold steady. This is your new ceiling.
Weeks 3–4	7 bottles	Tiny cut. 7 is the new normal.
Weeks 5–6	6 bottles	Another small step. You're trending down.
Weeks 7–8	5 bottles	Halfway there in volume. Stay consistent.
Weeks 9–10	4 bottles	Your body is adjusting. Peptides help here.
Week 11	3 bottles	Significant territory. Don't rush.
Week 12	3 bottles	Hold the 3-bottle level. Let it settle.

WEEK	DAILY BOTTLES	NOTES
Week 13	2 bottles	Almost there. This cut is hard. Plan for it.
Week 14	2 bottles	Hold. Don’t white-knuckle it. Use your stack.
Week 15	1 bottle	One more week. You can see the finish line.
Week 16	1/2 bottle	Final step. Half a bottle for 7 days.
Week 17+	ZERO	You’re free. Now the healing deepens.

TAPER RULES (UPDATED)

IF A CUT IS TOO HARD — HOLD AN EXTRA WEEK.
There is no prize for speed. If you held a level for 3 weeks instead of 2, you didn’t fail. You were smart.

SPACE YOUR DOSES EVENLY.
If you’re at 5 bottles: one every 3–4 hours while awake. Do not front-load your day. Your brain needs consistent blood levels during taper.

ACCOUNTABILITY SYSTEM.
Have a friend hold your doses. Mark completed bottles with red tape. Use a box for empties. Anything that puts physical friction between you and extra doses.

THE LAST CUTS ARE HARDEST.
Going from 2 → 1 → 0 is harder than going from 8 → 6. Know this going in. Stack your peptide support during these weeks.

OPTION B — THE PRECISION PILL TAPER

BEST OPTION for people who can’t control liquid dosing or who keep failing the bottle taper.

WHY THE 7-OH PILL IS A RECOVERY TOOL

7-OH.com sells direct 7-OH capsules. This is actually a significant harm reduction advantage.

Here’s why switching to pills is smarter than continuing to taper the bottles:

- PRECISION DOSING: You know exactly how many milligrams you're taking. No guessing from bottle to bottle.
- REMOVE THE KAVA LAYER: Feel Free has kava on top of 7-OH. Pills remove one entire dependence axis.
- MICRO-REDUCTIONS POSSIBLE: You can cut a capsule in half or even quarters. Try doing that with a liquid bottle.
- CONSISTENT HALF-LIFE: Same formulation every time. Your body gets a predictable signal.
- LOWER CEILING: It's much harder to accidentally dose 12 pills than 12 bottles.

THIS IS NOT TRADING ONE ADDICTION FOR ANOTHER.
You are already addicted to 7-OH. You are switching from an imprecise, multi-compound liquid to a single, standardized compound that you can actually taper with control. It's the difference between measuring with a bucket vs. a measuring cup.

HOW TO DO THE PILL TAPER:

1. Contact Centurian and determine the mg content of their 7-OH capsules.
2. Calculate your current 7-OH exposure: Look at Feel Free's lab data (concentrated 7-OH per bottle) and multiply by your daily bottles. This is your baseline in mg.
3. Match that dose in pills for the first week. Do not go lower yet — just stabilize.
4. Reduce by 10–15% every 2 weeks. This is far more manageable than bottle-based cuts.
5. When you reach a very low dose (roughly 10–15% of your starting dose), make the final jump to zero.
6. Use the STRENGTH Peptide Stack throughout the entire process.

OPTION C — PLAIN KRATOM BRIDGE

Some people find it easier to first switch from Feel Free to regular kratom powder, then taper off that. This is because regular kratom is significantly less potent than Feel Free's concentrated 7-OH extract.

HOW THE KRATOM BRIDGE WORKS

STEP 1: SWITCH TO PLAIN KRATOM
Replace Feel Free bottles with regular kratom powder or capsules. Rough starting

point: 3–5 grams of kratom powder to replace one bottle of Feel Free. Adjust based on how you feel. The goal is stable, not high.

STEP 2: STABILIZE
Spend 1–2 weeks finding the kratom dose that keeps you stable (not high, just not sick).

STEP 3: TAPER THE KRATOM
Reduce by 0.5g every 3–4 days. This is easier than bottle-based cuts because you control exact grams.

STEP 4: JUMP OFF
When you're at 2–3 grams/day, make the jump. Use your STRENGTH stack at full strength for this phase.

THE STRENGTH PROTOCOL STACK

Peptide-Based Withdrawal Recovery — Advanced Support for 7-OH Dependence

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WAIT — WHY SHOULD I TRUST SOME PEPTIDE I'VE NEVER HEARD OF?

That's the right question. Let's talk about it honestly.

You trusted Feel Free because it was at the gas station. In a nice blue bottle. Your friend handed it to you and said it was fine. He rolled with it. Didn't happen to him. So you figured it was safe.

Here's what was actually going on: Feel Free's "trust" was marketing. The blue bottle was designed to look pharmaceutical. Gas station presence made it seem legal and vetted. Your friend's experience seemed like proof — but what you didn't know is that your genetics (possibly MTHFR, COMT variants) made you process 7-OH completely differently than he did. He wasn't lying. His body just handles it differently than yours. That's not a moral difference. That's biology.

So what makes a peptide MORE trustworthy than a blue bottle?

- BPC-157 is a fragment of a protein your stomach already produces. It's not foreign chemistry. It's a signal your body already knows how to read.
- Selank was developed from Tuftsin — a peptide your own immune system makes. It's been used in clinical settings for anxiety for over 30 years.
- DSIP was isolated from the brains of sleeping rabbits in the 1970s. It's literally a naturally occurring sleep signal.
- None of these activate your opioid receptors. Not one. They repair the damage without creating new dependence.

The difference:
Feel Free's trust signal was a pretty bottle and a friend's story. These peptides' trust signal is mechanism — they work on specific systems in your body in ways that have been studied and documented. We're going to explain each one in plain language so you know exactly what it's doing and what you'll feel.

And one more thing:
Your friend was probably fine on Feel Free because his genetics let him. These peptides don't care about your genetics — they work WITH your biology

whatever it is. Someone with MTHFR, someone with COMT issues, someone with high receptor sensitivity — all of them benefit. The recovery process is just yours to run.

HOW 7-OH WITHDRAWAL BREAKS THREE SYSTEMS AT ONCE

When 7-OH is removed, three systems in your brain crash at the same time. This is why withdrawal feels like more than one thing going wrong at once — because it is.

- DOPAMINE SYSTEM crashes: The reward signal collapses. Nothing feels good. No motivation, no pleasure, no point to anything. This is anhedonia — and it's temporary, but it's brutal.
- GLUTAMATE spikes out of control: Without 7-OH dampening it, your brain's excitatory signal goes haywire. That's the physical agitation, the restless legs, the anxiety that feels like a fire alarm that won't shut off.
- SLEEP ARCHITECTURE collapses: Opioids suppress REM sleep. Remove them and your brain swings the other direction — too much REM, too vivid, can't get there, can't stay there.

The STRENGTH peptide stack was built to address all three simultaneously — without activating opioid receptors.
Each peptide has a specific job. We're going to tell you not just WHAT it does, but what you will FEEL when it's working.

PHASE 1: ACUTE WITHDRAWAL ARMOR

Days 1 through 14 — the hardest stretch. These peptides are your front-line defense.

Peptide	Dose	Route / Timing	What It Does For You
BPC-157	250–500 mcg	SubQ injection or oral, once daily morning	THE MOST IMPORTANT ONE. Shown in research to directly reverse opioid-induced dopamine system disruption. Also heals the GI tract (devastated by opioid withdrawal). Reduces anxiety. Starts working within days.
Selank	300 mcg	Intranasal,	Derived from the body's own

Peptide	Dose	Route / Timing	What It Does For You
		2x/day (AM + midday)	enkephalin system. Stabilizes endogenous opioid peptides. Creates a gentle calming signal WITHOUT activating mu receptors. The closest thing to a safe 7-OH mimic that doesn't perpetuate dependence.
DSIP	100–200 mcg	SubQ or intranasal, 30–60 min before bed	Delta Sleep-Inducing Peptide. Directly addresses the #1 complaint in 7-OH withdrawal: cannot sleep. Unlike benzos or z-drugs, DSIP works WITH your sleep architecture rather than suppressing it.
Semax	100–300 mcg	Intranasal, once daily morning	ACTH-derived nootropic. Boosts BDNF (brain repair factor), reduces anxiety, clears brain fog. Helps the cognitive symptoms of withdrawal: can't think, can't focus, everything feels wrong.

WHAT YOU'LL ACTUALLY FEEL — PHASE 1 (Plain Talk)

BPC-157:
Day 1–2: Probably nothing obvious. It's doing quiet repair work.
Day 3–5: The gut cramping and bathroom urgency starts to ease. That constant sick, heavy feeling in your stomach — slightly less violent.
Day 5–7: The dark blanket feeling — where everything feels pointless and gray — may have slightly lifted. Not happy. Just less like you're at the bottom of a well.
Week 2: Cravings have sharper edges knocked off. Still there. Just less overwhelming.

Selank:
Within hours of the first dose: The anxious screaming in your nervous system turns down. Not gone — turned down. Like someone finally found the volume knob. It won't feel like a high. It will feel like a one-degree reduction in how unbearable this is. That's the point.
Day 2–3: More consistent. The panic peaks are less sharp. You have a few minutes of something that isn't dread.

DSIP:
Night 1: You may feel drowsy earlier than expected. Not knocked out — more like your body remembering it's allowed to shut down. Your brain's sleep signal was outsourced to 7-OH for months. DSIP is a note to your system that says: it's safe to sleep now.
Night 2–3: Sleep comes faster. Still broken. But faster. You may wake at 3am but get back to sleep — that's progress.

Semax:
Day 2–4: The brain fog starts to thin slightly. Words come a little easier. Thinking through less concrete. Don't expect dramatic clarity — just slightly less like you're operating at 20% of yourself.
Week 2: Noticeably more present. Starting to string thoughts together. This is BDNF doing its job.

SELANK: THE CLOSEST SAFE MIMIC TO 7-OH (THIS IS IMPORTANT)

People often ask: 'is there something I can take that feels a little like 7-OH so my brain stops screaming?'

The honest answer: nothing that's actually safe will replicate the high of 7-OH. But Selank does something more useful.

Here's the biology:

- Selank is based on Tuftsin, a naturally occurring peptide that regulates the immune and neuroendocrine system.
- It inhibits enkephalinase — the enzyme that breaks down your body's own opioid peptides (enkephalins).
- Result: your own natural endorphin-like signals last longer and work harder.
- It also modulates serotonin, dopamine, and GABA — the exact neurotransmitters wrecked by 7-OH withdrawal.

In plain English:
Selank helps your brain remember how to feel okay on its own. It's not giving you a chemical vacation. It's teaching your brain to produce its own again. This is the difference between a prosthetic and physical therapy.

Most users report a noticeable reduction in the anxiety and restlessness of withdrawal within 2–3 days of consistent use. It won't get you high. It will make the floor of withdrawal significantly higher.

PHASE 2: RECEPTOR REPAIR (Weeks 2–8)

The physical symptoms are easing. Now the work is rebuilding what 7-OH damaged. This phase is about neurological reconstruction.

Peptide	Dose	Route / Timing	What It Does For You
BPC-157	250 mcg	Continue daily SubQ or oral	Continue without interruption. BPC-157 is driving the dopamine pathway repair that takes weeks to complete. Do not stop early.
Epithalon	5–10 mg	SubQ, 5 days on / 2 days off before bed	Pineal gland regulator. Restores melatonin production and circadian rhythm. Critical for weeks 2–4 when sleep is still disrupted but the acute crisis has passed. Also linked to telomere and cellular repair.
TB-500	2.5–5 mg	SubQ, twice weekly	Systemic healing accelerator. The body takes a beating during withdrawal — inflammation, muscle aches, immune suppression. TB-500 clears systemic damage and speeds overall recovery.
Semax	100–300 mcg	Continue intranasal, morning only	Continue through this phase. BDNF levels need sustained support. Brain fog often persists into weeks 4–6 without this kind of nootropic scaffolding.

WHAT YOU'LL ACTUALLY FEEL — PHASE 2 (Plain Talk)

BPC-157 (continuing):
By now it's working in the background. The reward system is slowly coming back online. You'll notice this as occasional moments of actually wanting to do something — eat, go outside, talk to someone. Those moments are BPC-157 and your dopamine system reconnecting. They'll become more frequent each week.

Epithalon:
Week 2–3 of sleep: Things get more predictable. You're waking up at a more consistent time. The nightmares or hyperreal dreams start to settle. Your sleep still isn't perfect but it has a shape to it now instead of just being chaos.

TB-500:
The deep muscle aches that have been sitting in your legs and lower back — they start to quiet down. You may notice you're less inflamed-feeling overall. Easier to move, easier to exercise, and exercise is medicine right now.

Semax (continuing):
By weeks 3–4 you should be noticeably more cognitively present. This is the phase where people say "I feel like myself again," even if just in flashes. That's BDNF rebuilding the neural scaffolding that chronic 7-OH use erodes.

PHASE 3: NEUROLOGICAL REGENERATION (Months 2–6)

You're through the worst of it. This phase is about making the recovery permanent and protecting against relapse by rebuilding a genuinely functional reward system.

Peptide	Dose	Route / Timing	What It Does For You
BPC-157	250 mcg	Taper to 3x/week, or cycle: 4 weeks on / 2 weeks off	Maintenance level. The dopamine system repair is mostly complete but BPC-157 cycles support ongoing neuroplasticity.
Epithalon	5 mg	Annual or bi-annual 10-day course	Epithalon is typically run as a periodic course rather than daily. The sleep and circadian benefits persist after the cycle ends.
Dihexa	8–16 mg	Oral, daily (cycle 4–8 weeks)	Powerful BDNF enhancer and synaptogenic peptide. Better than Semax for long-term cognitive reconstruction. Rebuilds the neural connections that chronic opioid use erodes.
Selank	As needed	Intranasal, on high-craving days only	Transition Selank to an as-needed tool. Use it when cravings are hitting hard or stress is spiking. It remains effective on demand without losing potency.

WHAT YOU'LL ACTUALLY FEEL — PHASE 3 (Plain Talk)

Month 2–3:
Good days start to outnumber bad days. That sentence probably felt impossible to believe in week 1. This is what sustained BPC-157 and L-Methylfolate does to a system that was running on fumes.

Dihexa:
This is where the cognitive restoration gets real. People describe it as "my brain coming back online." Not a stimulant feeling — not a high. More like the difference between thinking through static vs. thinking through clear air. Memory starts working again. You remember things. Sentences complete themselves.

Selank on-demand:
By Phase 3 you may not need it every day. But keep it. When a craving hits hard, when a stressful event lands, when an anniversary of something painful comes around — two sprays, volume down, ride it out. It doesn't lose its edge when used occasionally.

The overall picture:
Month 3, most people report: actually wanting to do things. Energy that doesn't crash. Emotions that make sense. The ability to feel genuinely good about something without needing a substance to get there. That's your reward system rebuilt. That's what all of this was for.

THE STRENGTH ACRONYM — YOUR DAILY REMINDER

S — Sleep first. DSIP + Epithalon. Sleep is when your brain physically rebuilds opioid receptors.

T — Taper precisely. Pill taper or slow bottle taper. Control the variable. Imprecision costs you.

R — Receptor repair. BPC-157 is non-negotiable. It directly reverses opioid-pathway damage.

E — Enkephalin support. Selank keeps your own opioid peptides in play while your system resets.

N — Neuro-reconstruction. Semax → Dihexa. BDNF is the growth hormone of your brain. You need it.

G — Gut healing. BPC-157 heals the GI tract. Opioid withdrawal wrecks digestion. Same peptide, dual role.

T — Tissue recovery. TB-500 clears systemic inflammation and speeds body-wide healing.

H — Hold the line. The stack works. Stay on protocol. Trust the biology.

A NOTE ON PEPTIDE SOURCING AND ADMINISTRATION

These peptides are research compounds. Here's what you need to know:

- BPC-157, Selank, Semax, and DSIP are available from research peptide

suppliers. Quality varies significantly — use reputable vendors with third-party COAs (Certificates of Analysis).

- SubQ (subcutaneous) injection is the most effective route for BPC-157 and TB-500. Intranasal nasal spray is effective for Semax, Selank, and DSIP.
- BPC-157 also has oral bioavailability (unlike most peptides). Oral capsules or dissolved in water are a valid alternative to injection for some people.
- Epithalon is typically run as a short course (10–14 days) rather than daily indefinitely.
- ALWAYS consult with a knowledgeable practitioner before starting any injectable protocol. Peptide-friendly functional medicine doctors and longevity clinics are increasingly accessible.

IMPORTANT: Peptides are a support tool, not a magic cure. They dramatically reduce the floor of withdrawal and accelerate recovery, but the taper work still has to happen.

THE FULL RECOVERY STACK

Peptides work best alongside a strong foundational supplement protocol. Here's the complete picture.

⚡ TIER 1: THE HEAVY LIFTERS (Physical Withdrawal)

Liposomal Vitamin C
Protocol: 3,000–5,000mg every 2–3 hours during acute withdrawal. Cannot overdose — your body uses what it needs and excretes the rest. Blocks 70–80% of physical withdrawal symptoms for many people. Non-negotiable in the acute phase.

Black Seed Oil (Thymoquinone)
Soothes opioid receptor sites without activating them. Anti-inflammatory. Reduces the raw, irritated feeling in your nervous system.

Agmatine Sulfate
Lowers 7-OH tolerance from below and protects against glutamate surges (the neurochemical cause of physical restlessness and agitation). Take 1,500–2,000mg daily.

NAC (N-Acetyl Cysteine)
Regulates glutamate in the nucleus accumbens — the brain's reward hub. Stops obsessive looping thoughts and reduces compulsive craving behavior. 600mg 2x/day.

TIER 2: THE NEURO-REPAIR STACK (Mood & Depression)

L-Methylfolate + Methylcobalamin (B12)
If you carry MTHFR variants (extremely common in people with addiction histories), your body CANNOT synthesize dopamine and serotonin efficiently without the methylated form of these vitamins. Standard folic acid will not work. Use L-methylfolate (Deplin-equivalent) at 7.5–15mg daily. This is raw material for your brain's recovery.

Magnesium Glycinate
400–600mg before bed. Essential for COMT enzyme function (clears excess adrenaline), GABA receptor support, and sleep. Non-negotiable. This is your cheapest most effective daily tool.

Vitamin D3 + K2
5,000 IU D3 daily with 100mcg K2. Opioid users are almost universally deficient. D3 directly modulates mood and immune function.

Omega-3 (High EPA)
2–4g daily, high EPA formulation. EPA specifically reduces inflammation in the brain and supports dopamine receptor density recovery.

TIER 3: SLEEP RESTORATION

- Magnesium Glycinate: 400–600mg — your foundation
- DSIP peptide: 100–200mcg before bed (Phase 1 & 2)
- Epithalon: 5–10mg cycle (Phase 2+)
- Melatonin: 0.5–1mg (low dose works better than high dose)
- L-Theanine: 200mg — calms without sedating
- Room at 65–68°F, total darkness, consistent bedtime
- Hot bath 60–90 minutes before bed: drops core temperature, signals sleep

AVOID: Benadryl nightly (causes next-day grogginess and worsens withdrawal over time). Alcohol completely (destroys sleep architecture and reactivates cravings).

WHAT WITHDRAWAL FEELS LIKE

Because Feel Free has concentrated 7-OH alkaloids, withdrawal can be intense. Here's what's normal — and which STRENGTH tools address each symptom.

SYMPTOM	WHY IT HAPPENS	STRENGTH TOOL
Can't sleep	Opioid withdrawal causes REM rebound and insomnia	DSIP peptide + Epithalon + Magnesium Glycinate
Restless legs	Glutamate surge, dopamine collapse	Agmatine + Magnesium + Selank
Anxiety / panic	Norepinephrine spike without opioid dampening	Selank (immediate) + BPC-157 (sustained)
Depression / anhedonia	Dopamine system crash	BPC-157 + Semax + L-Methylfolate
Muscle aches	Inflammation, nervous system dysregulation	TB-500 + Liposomal C + hot baths
GI distress	Opioid receptors in gut destabilized	BPC-157 (heals gut lining) + Liposomal C
Brain fog	BDNF suppression, oxidative stress	Semax + Dihexa + NAC + Omega-3
Cravings	Dopamine deficit state + enkephalin depletion	Selank + NAC + BPC-157 + exercise
Mood swings	COMT overload, MTHFR methylation disruption	Magnesium Glycinate + L-Methylfolate + B12
Sweating / chills	Autonomic nervous system dysregulation	Liposomal C + hydration + electrolytes

THE 7-OH TIMELINE (REALISTIC)

ACUTE PHASE (Days 1–7 after last dose):
Physical symptoms peak at days 2–4. With the STRENGTH stack, many people report 40–60% reduction in severity. This is the phase where full peptide + supplement loading matters most.

POST-ACUTE PHASE (Weeks 2–8):
Physical symptoms fade. The mental load stays: cravings, low mood, motivation issues, sleep irregularity. Semax, BPC-157, and L-Methylfolate carry this phase.

FULL RECOVERY (Months 2–6):

Brain chemistry returning to baseline. Each week better than the last. Dihexa and long-cycle BPC-157 support completion of receptor density recovery. Most people feel genuinely better — not just less bad — by month 3.

If you tapered slowly AND used the STRENGTH stack, you spread all of this out and made each phase significantly milder.

HOW TO HANDLE CRAVINGS

Cravings are like waves. They build, they peak, and they pass. Most only last 15–30 minutes. If you can ride it out, it WILL pass.

⏱ THE 20-MINUTE RULE

7. LOOK AT THE CLOCK — Note the time.
8. TELL YOURSELF: “I just have to make it 20 minutes.”
9. DO ANYTHING ELSE for those 20 minutes. Anything.
10. CHECK BACK — The craving will be weaker or gone.

You’re not saying “never again.” You’re saying “not right now.” That’s way easier for your brain to handle.

🧰 CRAVING RESPONSE TOOLKIT

IMMEDIATE (0–2 minutes):

- Intranasal Selank: 300mcg. Fastest biochemical craving interrupt available in your stack.
- Cold water on face or cold shower. Shocks the autonomic nervous system and interrupts the craving loop.
- 5-7-8 breathing: in 4 counts, hold 7, out 8. Repeat 5x. Activates parasympathetic brake.

SHORT-TERM (2–20 minutes):

- Move your body. Walk, pushups, anything. Exercise clears craving chemistry.
- Call or text someone who knows what you’re going through.
- Change locations. Cravings are often location-anchored. Move.
- Strong flavors: sour candy, hot sauce, strong mint. Sensory interrupt.

YOUR TRIGGER MAP:
Write down when you usually reach for Feel Free. Morning? After work? Bored? Stressed? Lonely? These are your ambush points. Have a plan for each one BEFORE you get there.

YOUR RECOVERY INVENTORY

Get all of this assembled BEFORE you start. You'll need it when you're in the middle of it and can't think clearly.

WHAT TO HAVE READY

PEPTIDES (order in advance):

- BPC-157 — Phase 1, 2, and 3 foundation
- Selank nasal spray — Anxiety and craving interrupt
- DSIP — Sleep restoration (Phase 1 + 2)
- Semax nasal spray — Cognitive support and BDNF
- Epithalon — Circadian and sleep repair (Phase 2+)
- TB-500 — Systemic healing support

SUPPLEMENTS:

- Liposomal Vitamin C — 3,000–5,000mg bottles (the good kind, not ascorbic acid tablets)
- Agmatine Sulfate — 1,500–2,000mg daily
- NAC — 600mg 2x/day
- L-Methylfolate — 7.5–15mg (not folic acid)
- Methylcobalamin B12 — 1,000mcg sublingual
- Magnesium Glycinate — 400–600mg
- Vitamin D3+K2, Omega-3, Black Seed Oil

PHYSICAL COMFORT:

- Heating pad (muscle aches and restless legs)
- Epsom salts for baths
- Electrolyte packets (Pedialyte, LMNT, or similar)
- Imodium (for GI distress)
- Room thermometer — keep it at 65–68°F for sleep
- Blackout curtains + white noise machine

AFTER YOUR LAST DOSE: DAY BY DAY

If you tapered slowly and used your STRENGTH stack, this will be significantly milder than cold turkey.

TIME	WHAT TO EXPECT	WHAT TO DO
Day 1	Anxiety building, sleep getting hard	Load your peptide stack. Hydrate. Go to bed early with DSIP.
Days 2–3	Peak physical symptoms	Full peptide stack, Liposomal C every 2–3 hours, hot baths, rest.
Days 4–5	Starting to turn the corner	Keep going. Eat. Walk. You're almost through the acute phase.
Days 6–7	Physical stuff fading	Each day better. Start light routine. Semax helps cognition return.
Week 2	Physical mostly gone, mental hangs on	NAC + L-Methylfolate + BPC-157 carry this phase. Selank as needed.
Weeks 3–4	Feeling more human	Sleep improving. Transition to Phase 2 peptide stack.
Month 2	Much better	Good days outnumber bad. Dihexa cycle for cognitive restoration.
Months 3–6	New normal forming	Brain healing completing. Energy returning. You made it.

⚠ THE SLEEP PROBLEM — READ THIS

Sleep is usually the worst part of 7-OH withdrawal. Your brain's sleep system got dependent on the mu-opioid signal. When you remove it, the sleep architecture collapses.

EXPECT:

- Trouble falling asleep
- Waking at 3am unable to get back to sleep
- Restless legs at night
- Vivid, intense dreams when you do sleep (REM rebound)

STRENGTH PROTOCOL FOR SLEEP:

- DSIP: 100–200mcg 30–60 minutes before bed (acute phase)
- Magnesium Glycinate: 400–600mg at bedtime
- Epithalon cycle: especially weeks 2–4 for circadian reset

- L-Theanine: 200mg to reduce sleep-onset anxiety
- Room at 65–68°F, total darkness, consistent bedtime
- Hot bath 90 min before bed — core temp drop signals sleep onset

TIMELINE: Sleep usually starts returning around week 2. With DSIP and Epithalon, many people see improvement in week 1. By month 2, most people are sleeping reasonably well.

STAYING OFF: THE REAL WORK

YOUR BRAIN WILL LIE TO YOU

After a few weeks feeling good, your brain will say:

- “You’re better now. You can have just one.”
- “See, it wasn’t that bad. You overreacted.”
- “Just one bottle won’t hurt.”
- “This time you can control it.”

THESE ARE ALL LIES.

The 7-OH alkaloids rewired your receptor system. One dose will reactivate that pathway instantly. One becomes two. Two becomes ten. You’re back at the beginning — or worse. There is no ‘just one’ for you. Not anymore. Write down WHY you quit. Look at that list when the lies come.

BUILD A LIFE YOU DON'T WANT TO ESCAPE FROM

Ask yourself: why were you drinking 8–12 bottles a day in the first place? Feel Free was your escape. If you don’t deal with what you were escaping FROM, you’ll find another escape.

This might mean:

- Finding something meaningful to do
- Dealing with whatever you’ve been avoiding
- Making real connections with people
- Getting help for depression or anxiety
- Finding healthy ways to feel good
- Addressing physical pain properly

THE GOAL: Build a life where you don’t NEED to escape.

YOU NEED PEOPLE — OR AN AI THAT ACTUALLY GETS IT

You cannot do this alone. Isolation is where relapse lives. Tell at least ONE person — or one system — what you're going through.

IF YOU HAVE PEOPLE:

- NA meetings — free, everywhere. Yes, kratom/Feel Free counts.
- SMART Recovery — online, free, science-based.
- Reddit r/quittingkratom — thousands of people who get it.
- Reddit r/feelfreesupport — specific to Feel Free.

IF YOU DON'T HAVE PEOPLE — OR IT'S 3AM AND THEY'RE ASLEEP:

The Recovery Kernel

Some people going through this have no sponsor, no NA group they trust, no friend who gets it. Just their phone and a craving that's getting loud.

The Recovery Kernel is a neurogenomics-based addiction recovery framework with an AI companion built specifically for this. It doesn't just say "you can do it!" It actually understands:

- Why YOUR genetics (MTHFR, COMT) make this harder for you than for your friend who "rolled with it fine"
- Why 7-OH specifically hijacks your reward system the way it does
- What's happening in your body during each phase of withdrawal
- How to think about your symptoms as biology, not moral failure

You can open it on your phone at any hour and talk through what's happening. It will not judge you. It will not get tired of your questions. It speaks plain language AND it can go deep on the science when you want that.

Access it at: github.com/JRToken-NGI/recovery-kernel

(Look for the KERNEL_AI.md file — it gives you instructions for deploying it as a conversation partner on any AI platform you have access to.)

Being around systems and people who understand changes everything. When you're alone with your thoughts, the lies win. The Recovery Kernel is one more tool to keep you from being alone with your thoughts.

IF YOU SLIP UP

It happens. Many people slip on the way to getting clean for good. What you do NEXT is everything.

❌ WHAT NOT TO DO

DON'T say: "I already messed up, might as well keep going."

One slip doesn't erase your progress. Going back to 8–12 bottles does.

Think of it this way:
A slip = stepping in a puddle. Full relapse = jumping in the ocean. You stepped in a puddle. Don't jump in the ocean.

✅ WHAT TO DO INSTEAD

11. STOP RIGHT NOW. Put it down. One slip doesn't have to become a full relapse.
12. TELL SOMEONE IMMEDIATELY. Shame wants you to hide. Don't hide. Secrets keep you sick.
13. FIGURE OUT WHAT HAPPENED. What triggered it? Be honest.
14. RELOAD YOUR STACK. Get your peptides and supplements back on schedule TODAY.
15. MAKE A PLAN for that trigger next time.
16. GET BACK ON TRACK NOW. Not tomorrow. Not Monday. Right now.
17. DON'T DESTROY YOURSELF. Shame makes you want to use more. Learn from it and move forward.

💚 EVERY DAY CLEAN MATTERS

If you were clean for 60 days and slipped once, you didn't lose those 60 days. Your brain was healing that whole time. Your receptors were recovering. Your life was getting better.

One slip is a stumble, not a fall. Dust yourself off. Keep going.

THE TRUTH ABOUT THIS

Let’s be completely real.

Feel Free contains concentrated, potent 7-OH alkaloids that create real physical dependence comparable to pharmaceutical opioids. At 8–12 bottles a day, you’re dealing with serious stuff. This is going to be one of the hardest things you’ve ever done.

There will be days when you want to give up. There will be nights that feel endless. There will be moments when Feel Free seems like the only answer.

But you are not doing this without tools anymore. You have the STRENGTH stack. You have a realistic taper. You have peptides that target the exact systems 7-OH damaged. You have a map.

WHAT'S WAITING FOR YOU

- Waking up without needing something just to feel normal
- Having money again (add up what you were spending — it’s insane)
- Not planning your whole life around bottles
- Real energy that doesn’t crash
- Being actually present for the people you love
- Feeling proud of yourself
- Being FREE — actually free, not “Feel Free”

You can do this.

People hooked on harder stuff have gotten clean. People who thought they never could have done it.

You’re not weak. You got hooked on something specifically designed to hook you.

Now you’re taking your life back.

One day at a time. One hour at a time if that’s what it takes. One craving at a time.

A NOTE FROM THE ARCHITECT

You are designing your new brain.

Every time you ride out a craving without dosing, your brain physically rewires a neural pathway. Every dose of BPC-157 is scaffolding new dopamine infrastructure. Every morning Semax spray is BDNF being deployed to repair the connections that 7-OH eroded. Every day of taper is a controlled demolition of the addiction architecture, replaced by something stronger.

This isn’t about being a ‘sober saint.’ It’s about Sovereignty.

- Sovereignty means YOU decide what chemicals run your system.
- Sovereignty means you understand your MTHFR and COMT status and manage them with nutrition and peptides, not blue bottles.
- Sovereignty means you are free.

Once you are out, stay out. Your genetics haven’t changed. If you pour 7-OH back into a COMT Met/Met system, you will crash just as hard next time. The receptor memory doesn’t forget.

Keep this guide. Use the stack. Trust the biology.

The other side is worth it.